



**STATE OF MAINE**  
**DEPARTMENT OF AGRICULTURE, CONSERVATION & FORESTRY**  
**ANIMAL WELFARE PROGRAM**  
 28 STATE HOUSE STATION  
 AUGUSTA, MAINE 04333

**PAUL R. LEPAGE**  
GOVERNOR

**WALTER E. WHITCOMB**  
COMMISSIONER

## Animal Shelter Application

*A criminal background check is required by law. Please include **\$25.00 (per owner)** in addition to the **\$100.00 (license fee)**. Please make checks payable to Treasurer, State of Maine*

Facility Name: \_\_\_\_\_ Non-Profit ID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Location/Directions: \_\_\_\_\_

\_\_\_\_\_

Facility Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Hours/Days of operation (\*Required for inspection purposes): \_\_\_\_\_

Owner Name: \_\_\_\_\_  
                     First                    MI                    Last                    Nickname or Maiden Name

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Co-Owner Name: \_\_\_\_\_  
                     First                    MI                    Last                    Nickname/Maiden name

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

### 7 § 3935. License Prohibited

The department may not issue a license to maintain a boarding kennel, breeding kennel, animal shelter or pet shop to a person who, within the 10 years previous to the application for the license, has been convicted of murder, a Class A or Class B offense, a violation under Title 17-A, chapter 9, 11, 12 or 13 or a criminal violation under Title 17, chapter 42, or under a criminal law involving cruelty to animals that is no longer in effect, or within 10 years previous to the application for the license, has been adjudicated of a civil violation for cruelty to animals under chapter 739 or has been convicted or adjudicated in any other state, provincial or federal court of a violation similar to those specified in this section.

**LIAM HUGHES, DIRECTOR**  
 ANIMAL WELFARE PROGRAM  
 90 BLOSSOM LANE, DEERING BUILDING



PHONE: (207) 287-3846  
 FAX: (207) 287-2400  
 WWW.MAINE.GOV/DACF

Species of animals your facility will accept: \_\_\_\_\_

Shelter Capacity (available year round only): Dog pens: \_\_\_\_\_ Cat Pens: \_\_\_\_\_

Reptiles: \_\_\_\_\_ Birds: \_\_\_\_\_ Small mammals: \_\_\_\_\_

**Large Animal Shelter Capacity:**

Horse stalls: \_\_\_\_\_ Three sided run-in: \_\_\_\_\_

Cow stall/run-in: \_\_\_\_\_ Pig pen/shelter: \_\_\_\_\_

Poultry: \_\_\_\_\_ Other: \_\_\_\_\_

**Quarantine Area for New Arrivals**

Please describe your plan for isolating all new arrivals/placements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will you have an area for rabies quarantine? \_\_\_\_\_

Will you accept owner surrender animals? \_\_\_\_\_

Will you accept stray animals? \_\_\_\_\_

From which municipalities will you contract if so? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please attach a copy of the shelter's adoption policy.**

**Pursuant to 7 § 3913. Procedure for stray dogs**

*2-B. Adoption policy. Beginning January 1, 2010, to be eligible for reimbursement under subsection 2-A, an animal shelter must have an adoption policy. An adoption policy must provide for a dog to be available for adoption for a minimum of 24 hours except as provided in subsection 6. [2009 NEW]*

I certify the information given herein to be true and complete to the best of my knowledge.

\_\_\_\_\_  
Name (Signature)

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Date

*If Euthanasia is performed, you must be certified with the Maine Department of Agriculture, Animal and Plant Health (207)287-3701*